## BOSE MCKINNEY & EVANS LLP

## **CUSTOMER NUMBER 25267**

2700 First Indiana Plaza 135 North Pennsylvania Street Indianapolis, Indiana 46204

# 1 1 2005 PART APPLICATION

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Wildman, Timothy D., et al.

Serial No.:

10/698,652

Filing Date:

October 31, 2003

Title:

HYGIENE MONITORING SYSTEM

Group:

2636

Examiner:

LIEU, J.

Atty. Docket:

8266-1154

#### Certificate Under 37 C.F.R.§ 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

on February 8, 2005

Michael Rich

Dated:

February 8, 2005

## **LETTER TO OFFICIAL DRAFTSMAN**

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicant submits herewith corrected formal drawings for Figs. 8A and 8B for the above-identified application meeting the requirements of 37 CFR § 1.84. Attached are Annotated Marked-Up Drawings showing the proposed revisions, and clean copy Replacement Sheets.

If the Draftsman has any questions regarding the drawings, please contact applicant's undersigned attorney, at (317) 684-5000.

Respectfully submitted,

BOSE McKINNEY & EVANS LLP

Anthony P. Filomena

Reg. No. 44,108

Indianapolis, Indiana (317) 684-5000

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Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

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on	February 8, 2005					
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CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	RATE	FEE		
TOTAL CLAIMS (37 C.F.R. 1.16(c))	30	30	0	\$50	\$0		
INDEPENDENT CLAIMS (37 C.F.R. 1.16(b))	8	7	1	\$200	\$200		
If applicant has small entity status under 37 C.F.R 1.9 and 1.27, then divide total fee by 2, and enter amount here.  SMALL ENTITY TOTAL							
TOTAL FEE FOR ADDITIONAL CLAIMS							

<sup>\*</sup>If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space. \*\*If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space. \_ month(s) is hereby requested under An Extension of Time for 2 37 C.F.R. 1.136(a). The required fee for filing this extension is: 450.00 Information Disclosure Statement TOTAL FEE FOR THIS AMENDMENT \$650.00 A check in the amount of \$ 650.00 to cover the total fee for this amendment is attached.

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of apy overpayment, to Bose McKinney & Evans LLP's Deposit Account No. 02-3223. A duplicate copy of this sheet is firsteed

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Inthony P. Filome

Reg. No. 44,108